2018-272-C 283540 2019-12-A - 283541

		Telecommunio				
A	UTHORIZED	UTILITY	REPRESI	ENT	ATIVE FORM	
	CER	TIFICATED COM	IPANY INFOR	RMAT	ION	
Company Name: Crown Castle Fiber LLC						
DBA/FKA: N/A				тегерпопе # 724-416-2000		
Mailing Address: 20	000 Corporate Drive					
City: Canonsburg		State: PA			ZIP Code: 15317	
ILEC	IXC		CLEC X		Wireless ETC	
	R	EGISTERED AGI	ENT INFORM	ATIOI	N	
Registered Agent:	CT Corporation System					
Mailing Address: 6	00 N 2nd Street, Suite 4	01				
City: Harrisburg		State: PA			ZIP Code: 17101-1071	

## As required by Commission rules and regulations Print or type company contact person and contact information for the areas listed below:

	UTILITY REPRESENTATIVE INFOR	MATION
General Manager		
Name: Chris Levendos		
Address: Crown Castle, 360 Ha	nilton Ave	
City: White Plains	State: NY	ZIP Code: 10601
Phone: 212-324-5000	Email: Chris.Levendos@crowncastle.com	Fax:
Emergency Contact - No	Office Hours	
Name: Miles O'Shaughnessy		
Phone: 855-933-4237	Email: Fiber.Support@crowncastle.com	Fax: 703-434-8510
Customer Relations/Com	plaints Rep	
Name: Ravindra Harcharan		
Address: 201 Old Country Road	Suite 125	
City: Melville	State: NY	ZIP Code: 11747
Phone: 212-337-4088	Email: Ravindra.Harcharan@crowncastle.com	Fax:
Complaints Rep for Comp	laint Escalation	
Name: Fernanda H. Biehl		
Address: Crown Castle, 2000 C	orporate Drive	
City: Canonsburg	State: PA	ZIP Code: 15317
Phone: 703-434-8533	Email: PUC.Correspondence@crowncastle.com; Fernanda.Bieh@c	rowncastle.com Fax: 703-434-8510
Customer Toll Free Conta	ct Number: 855-933-4237	
<b>Engineering Operations</b>		
Name: Ravindra Harcharan		
Address: Crown Castle, 201 Old	Country Road, Suite 125	
City: Melville	State: NY	ZIP Code: 11747
Phone: 212-337-4088	Email: Ravindra.Harcharan@crowncastle.com	Fax:
Test and Repair		
Name: Ravindra Harcharan		
Address: Crown Castle, 201 Old	Country Road, Suite 125	ZIP Code: 117 RECEIV
City: Melville	State: NY	ZIP Code: 11747
Phone: 212-337-4088	Email: Ravindra.Harcharan@crowncastle.com	Fax:

UTILITY REPRESENTATIVE INFORMATION								
Regulatory Officer								
Name & Title: Deborah Kelly, Tax Officer								
Address: Crown Castle, 2000 Corporate Drive								
City: Canonsburg		State: PA	ZIP Code: 15317					
Phone: 724-416-2686	Email: Puc.o	Correspondence@crowncastle.com; Deborah.Keily@crowncastle	com Fax:					
Annual Report Form Mailings								
Name & Title: Fernanda H. Biehl, Mgr. Regulatory Affairs								
Address: Crown Castle, 196 Van Buren Street, Suite 250								
City: Hemdon		State: VA	ZIP Code: 20176					
Phone: 703-434-8533	Email: Puc.o	Correspondence@crowncastle.com; Fernanda.Blahl@crowncastle	Fax: 703-434-8510					
Dual Party Invoice Mailing	S							
Name & Title: N/A								
Address: N/A								
City: N/A		State: N/A	ZIP Code: N/A					
Phone: N/A Email: N			Fax: N/A					
Universal Service Fund Ma	ilings							
Name & Title: Fernanda H. Biehl, Mgr. Regulatory Affairs								
Address: Crown Castle, 196 Van I	Buren Street,	Suite 250						
City: Herndon		State: VA	ZIP Code: 20176					
Phone: 703-434-8533	Email: PUC.Co	orrespondence@crowncastle.com; Fernanda.Blehl@crowncastle	Ex: 703-434-8510					
Gross Receipts Mailings								
Name & Title: Fernanda H. Biehl	, Mgr. Regula	tory Affairs						
Address: Crown Castle, 196 Van Buren Street, Suite 250								
City: Herndon		State: VA	ZIP Code: 20176					
Phone: 703-434-8533	Email: PUC.C	orrespondence@crowncastle.com; Femands.Blehl@crowncastle.com	Fax: 703-434-8510					
Lifeline Contact								
Name & Title: N/A								
Address: N/A								
City: N/A		State: N/A	ZIP Code: N/A					
Phone: N/A	Email: N/A Fa		Fax: N/A					

FORM PREPARER INFORMATION								
This form was completed by: Fernanda H. Biehl, Mgr. Regulatory Affairs								
Signature: Turnand Rich,								
Title: Mar Regulatory Affairs	Date: March 15. 2019							

RETURN COMPLETED FORM TO:

Public Service Commission of SC

**Docketing Department** 

101 Executive Center Drive, Suite 100

Columbia, SC 29210

Office of Regulatory Staff

AND Attn. Kari Munn

1401 Main Street, Suite 800

Columbia, SC 29201